FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** ÜNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

May 31, 2005 Expires: Estimated average burden hours per response

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10% Convertible Secured Notes at	te of Offering (check if this is an amendment and name has changed, and indicate change.) Convertible Secured Notes and Warrants Offering In Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE The of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer The of Issuer (check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.) The of Issuer (Check if this is an amendment and name has changed, and indicate change.)			1 12
Filing Under (Check box(es) that appl	y): 🔲 Rule 504 🔲 Rule 505 🖾 🛚	Rule 506 🔲 Section 4	4(6) □ ULOE	4. 9
Type of Filing: New Filing	Amendment			<u> </u>
	A. BASIC IDENT	IFICATION DATA		Ś
1. Enter the information requested a	bout the issuer			Contract onne
Name of Issuer (check if this is a	n amendment and name has changed, a	and indicate change.)		, = 1,000
Vigilos, Inc.				á Oth
Address of Executive Offices	(Number and Street, (City, State, Zip Code)	Telephone Number (I	ncluding Area Code)
2030 First Avenue, Suite 300, Seatt	le, WA 98121		(206) 728-6464	
Address of Principal Business Operati (if different from Executive Offices)	ons (Number and Street, 6	City, State, Zip Code)	Telephone Number (I	ncluding Area Code)
Brief Description of Business Sale an	d distribution of computer software	B .	<u> </u>	P.D.O.
				PROCESSED
Type of Business Organization				ACT 1 C 2000
☑ corporation	☐ limited partnership, already for		er (please specify):	UCT 1 6 2016 2
□ business trust	☐ limited partnership, to be forme	au		THOMSON
Actual or Estimated Date of Incorpora	Month tion or Organization:	Year	ctual Estimated	FINANCIAL
Jurisdiction of Incorporation or Organ	ization: (Enter two-letter U.S. Postal S CN for Canada; FN for			A
GENERAL INSTRUCTIONS				·

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, fallure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director □ Promoter ☐ General and/or **Managing Partner** Full Name (Last name first, if individual) Barker, Geoffrey Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: □ Director ☐ General and/or **Managing Partner** Full Name (Last name first, if individual) Wolfe, Shawn Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 ☐ Beneficial Owner ☐ Executive Officer ☑ Director Check Box(es) that Apply: □ Promoter ☐ General and/or **Managing Partner** Full Name (Last name first, if individual) Wolfe, Robert G. Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 ☐ Executive Officer Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Gorton, Slade Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or **Managing Partner** Full Name (Last name first, if individual) Clifford, Steven Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 ☐ Director Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ General and/or **Managing Partner** Full Name (Last name first, if individual) Gorder, Douglas P. Business or Residence Address (Number and Street, City, State, Zip Code) 2030 First Avenue, Suite 300, Seattle, WA 98121 Check Box(es) that Apply: ☐ Executive Officer □ Promoter ■ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Northwest Venture Partners II, LP Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

211 N. Wall Street, Suite 628, Spokane, WA 99201

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Dacii general and man	aging parties of pe	a aicisinp issueis.			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Northwest Venture Partners					·
Business or Residence Address 211 N. Wall Street, Suite 628	•				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)	, , , , , , , , , , , , , , , , , , , ,		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)		***************************************	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
	77. 11		1 1 1 - 0411 - 44		

1 .	Has the issue	rsold orde	nes the issue	er intend to	sell to no	n-accredite	d investors	in this offe	rino?			Yes □	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.													2
2. What is the minimum investment that will be accepted from any individual?													n
													No
 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 													
	Enter the inf commission of the commission of th	or similar rebe listed is name of t	emuneration an associat he broker	n for solici ted person or dealer.	tation of proor agent of If more that	urchasers in a broker or an five (5)	n connection dealer region persons to	n with sale stered with be listed a	es of securi the SEC a	ties in the o	offering. state or		
Full Na	me (Last nam	ne first, if in	ndividual)										
Busines	ss or Residence	ce Address	(Number a	nd Street, (City, State,	Zip Code)							
Name o	of Associated	Broker or l	Dealer										
States i	n Which Pers	on Listed F	Ias Solicite	d or Intend	s to Solicit	Purchasers						**************************************	
(Che	eck "All State	s" or check	individual	States)	•••••							. 🗆 All	State
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	OM]	-
[MT]	(NE) [SC]	(NV) (SD)	[NH] [TN]	[NJ] [XT]	[MM] [TU]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[WV]	[OK]	[OR] [WY]	[PA [PR	-
	me (Last nam			nd Street, (City, State,	Zip Code)							
Name o	of Associated	Broker or l	Dealer									<u> </u>	
Staton i	n Which Pers	on Listed I	Ing Calinita	d or Intend	a to Colinit	Durchager							
	eck "All State											. □ A11	State
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[YY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	3
[RI]	[SC] me (Last nam	[SD]	(TN)	[TX]	[UT]	[VT]	[AV]	[AW]	[WV]	[WI]	[WY]	[PR]
I un i va	ane (Dast nan	io 1116t, 11 11	ioi v ioduli)										
Busines	ss or Residen	ce Address	(Number a	nd Street, (City, State,	Zip Code)							
Name o	of Associated	Broker or l	Dealer										,
States i	n Which Pers	on Listed I	Ias Solicite	d or Intend	s to Solicit	Purchasers	ı						
(Che	eck "All State	s" or check	individual	States)							•••••	. 🗆 All	State
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	}
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred	- 	
	Convertible Securities (including warrants)	\$ 1,438,000	\$ 250,00
	Partnership Interests		
	Other (Specify)	\$	\$
	Total		
		\$ <u>1,438,000</u>	\$ 250,00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	1	\$\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		5 .11.4
	Type of Security	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 10,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify)		\$
	Total	_ ⊠	\$ 10,000

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND U	SE OF IT	OCEEDS		
	and total expenses furnished in response to Par	offering price given in response to Part C — Que t C - Question 4.a. This difference is the "adjusted	d gross		\$_	1,428,000
5.	each of the purposes shown. If the amount is	is proceeds to the issuer used or proposed to be unifor any purpose is not known, furnish an estimated of the payments listed must equal the adjusted of the payments listed must equal the adjusted of the payments.	ite and			
	proceeds to the issues see form in response to 1	are a question the moore		Payments to		
				Officers,		
				Directors, &		Payments To
				Affiliates		Others
	Salaries and fees		□ \$		□ \$_	
	Purchase of real estate		□ \$			
	Purchase, rental or leasing and installation of	machinery	-		_	
	and equipment		□ \$		□ \$	
	Construction or leasing of plant buildings and	facilities	□ \$		□ \$_	
	Acquisition of other businesses (including the	value of securities involved in this				
	offering that may be used in exchange for the					
	issuer pursuant to a merger)		□ \$		□ \$_	
	Repayment of indebtedness				□ \$_	
	Working capital		×	0		
	- to the second		- 		пε	
						1,428,000
	Total Payments Listed (column totals added)			⊠	1,428,	000
		D. FEDERAL SIGNATURE			····	
_						
sign	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange credited investor pursuant to paragraph (b)(2) of Ro	Commiss			
Issu	er (Print or Type)	Signature		Date		····
	ilos, Inc.	1000		Sept.	29, U	rt.
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Do	iglas P. Gorder	President				
~		I				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature 1	Date
Vigilos, Inc.	al de	Sept. 29, 20%
Name of Signer (Print or Type)	Title of Signer/(Print or Type)	
Douglas P. Gorder	President	

APPENDIX

1		2	3		· · · · · · · · · · · · · · · · · · ·	4			5 ification	
	to non-a	I to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ								_		
AR										
CA		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	0		х	
CO		X	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0			х	
CT										
DE										
DC										
FL										
GA		,	-							
н										
ID		х	10% Convertible Secured Notes and Warrants \$1,438,000	0	0	0	0	\	х	
IL.		x	10% Convertible Secured Notes and Warrants \$1,438,000	0	0	0	0		x	
IN					• -	,				
IA										
KS										
KY						·				
LA							-			
ME										
MD										

APPENDIX

1	-	2	3	-		4			5 ification
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ate ULOE, attach atton of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MA		х	10% Convertible Secured Notes and Warrants \$1,438,000	0	0	0	0		x
MI									
MN		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	. 0		х
MS									
МО									
MT									-
NE									
NV									
NH									
NJ									
NM		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	0		х
NY		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	0		х
NC									
ND									
ОН		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	0		х
OK									
OR		х	10% Convertible Secured Notes and Warrants; \$1,438,000	0	0	0	0		X
PA		х	10% Convertible Secured Notes and Warrants; \$1,438,000	. 0	0	0	0		х

APPENDIX

1	2 3 4						5 Disqualification		
			Type of security		•				
	Intend	l to sell	and aggregate						ate ULOE , attach
		ccredited	offering price			f investor and		explan	ation of
		s in State -Item 1)	offered in state (Part C-Item 1)			urchased in State t C-Item 2)			granted) -Item 1)
	(ган Б	-1(eiii 1)	(ran C-nem 1)	Number of	(rai	Number of		(Part E	-item i)
				Accredited		Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
RI									
SC									
SD									
TN							, , , , , , , , , , , , , , , , , , , ,		
ТX					· ·		,		
		х	10% Convertible Secured Notes and Warrants;	0	0	0	0		X
UT			\$1,438,000		·				
VT									
VA									
		X	10% Convertible Secured Notes and Warrants;	1	250,000	0	0		х
WA			\$1,438,000						
WV									
WI									
WY									
PR	,								